

‘Green Plan Phase 2’ Our Sustainable Development Strategy 2025-2028

**Building on our 2022-2025 performance to deliver a
Net Zero Health Service**

Contents

- 1.0 Introduction and Context**
- 2.0 Purpose**
- 3.0 Shropshire Community Health Trust Green Plan**
- 4.0 Our core aims, ambitions and objectives**
- 5.0 Our Green Ambitions – Enablers and Areas for 2025 - 2028**
- 6.0 Monitoring Progress and Reporting**
- 7.0 Communication**
- 8.0 Risk**
- 9.0 Finance**

1. Introduction and Context

It is now widely recognised that climate change is a serious threat to life, our health, and our wellbeing. As one of the world's largest organisations the NHS has an absolute imperative to act to make a real and sustainable difference.

In 2008 the Climate Change Act set national targets for the reduction of carbon emissions in England, against a 1990 baseline, establishing the NHS Carbon Footprint.

Climate change threatens the health of the population and the ability of the NHS to deliver its essential services in both the near-term and longer term.

For this reason, in 2020 the NHS became the first national health system in the world to commit to decarbonise its operations, setting a clear target for net zero by 2045 for its total carbon footprint, with an 80% reduction by 2036 to 2039. This commitment gained legislative footing with the Health and Care Act (2022).

The objectives set out in with the '*Delivering a Net-Zero NHS*' report, expanded on the existing NHS Carbon Footprint, and established the NHS Carbon Footprint Plus. This now covers the full scope of emissions from the NHS and the Greenhouse Gas Protocol (GHGP) and supports international comparison and transparency:

Scope	Description	Examples
GHGP Scope 1: Direct Emissions	Direct emissions from sources that are owned or controlled by the NHS	• Direct fuel/energy use e.g. natural gas • Fuel used from institution owned vehicles • Anaesthetic Gases
GHGP Scope 2: Electricity Indirect Emissions	Emissions from the generation of purchased electricity consumed by the NHS	• Purchased electricity
GHGP Scope 3: Other Indirect Emissions	Emissions that are a consequence of the activities of the NHS, but occur from sources not owned or controlled by the NHS	• Construction, Water, waste, land-based travel, commuting (both staff and students) • Food and catering

2. Purpose

Shropshire Community Health NHS Trust (SCHT) recognises its role as an anchor institution and is taking ambitious action, as noted in its original Trust Board approved Green Plan 2022-2025, to tackle the twin challenges of climate change and air pollution. Indeed, many of the actions to cut carbon emissions also reduce air pollution which leads to direct and quantifiable impacts on health while also addressing health inequality.

Our carbon reduction strategy has been developed in response to the need for NHS services to take action on climate change and sets out our ambitions to deliver a net zero NHS service in our Trust. The table below provides a further breakdown of how services are delivered across the GHCP scope of emissions.

	Delivery of care	Personal travel	Supply chain	Commissioned
Scope 1	- On-site fossil fuel use - Anaesthetic gases - NHS fleet and leased vehicles			
Scope 2	Purchased electricity			
Scope 3	- Water and waste - Metered dose inhalers - Business travel	Staff commute	- Pharmaceuticals and chemicals - Medical equipment - Non-medical equipment - Business services - Food and catering - Other procurement	Commissioned health services
Non-Protocol*		- Patient travel - Visitor travel		

Although SCHAT is not the largest NHS organisation in Shropshire, Telford and Wrekin and Dudley, we improve the lives of the local population for generations through positive action on the environment.

3. Shropshire Community Health Trust Green Plan

This 2025-2028 Green Plan builds on our existing Green Plan and the Trust's Energy Management Policy to reflect recent changes in legislation, and it aligns to the Shropshire, Telford and Wrekin Integrated Care System (STW ICS) Green Plan and Integrated Care Board contractual requirements. Additionally, it reflects recent changes in legislation relating to the Clinical Waste Strategy, national standards for healthcare food and drink, and the Net Zero travel and transport strategy. As a result, SCHAT has:

- Reviewed our Green ambitions and the enablers to achieve these
- Publicly set our commitment to sustainable development
- Demonstrated how we expect to meet our legislative requirements
- Described how we will evaluate our impact
- Set out how we will monitor and assure against delivery of this strategy

4. Our core aims, ambitions and objectives

We continue working towards the two key targets set out by NHS England:

- To ensure the emissions we control directly (the NHS Carbon Footprint) are net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032**
- To ensure the emissions we can influence (our NHS Carbon Footprint Plus) are net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.**

In addition to these targets, SCHT also committed to:

- i. Reduce the carbon impact of NHS related travel and transport
- ii. Improve our Estates and Facilities to meet Net Zero
- iii. Move to a model of sustainable procurement
- iv. Co-design new models of care and health delivery innovation

5. Our Green Ambitions – Enablers and Areas for 2025 – 2028

The key enablers to support the delivery of our updated Green Plan have broadened in line with the 2025 national review. These enablers have been identified by the Greener NHS Unit and are the nine areas of focus within a Green Plan.

1. Leadership and Workforce:
2. Sustainable Models of Care
3. Digital Transformation
4. Travel and transport.
5. Estates and Facilities
6. Medicines
7. Supply Chain and Procurement
8. Food and Nutrition
9. Adaption

This plan sets actions for each of these areas of focus, describing our approach and the broad objectives for each of these enablers over the next three years.

1. Leadership and Workforce

System collaboration and partnership working is an essential part of our approach to sustainability. In preparing the Green Plan we have engaged with Shropshire, Telford and Wrekin and Dudley partners and NHS regional forums, sharing ideas and comparing progress.

Community healthcare creates specific environmental challenges and necessitates innovation around sustainable models of care. As a community provider, the Trust owns or leases space in a high number of premises and accesses more. The reduction of our carbon footprint not only requires decarbonising our estates, but also extensive liaison with third-party landlords. Furthermore, much of our patient care is delivered by clinicians in patient homes, meaning green transport strategies are essential.

During 2025 - 2028 we will:

Leadership

- Develop and strengthen our strategic plans with system partners across Shropshire Telford and Wrekin and Dudley. Continue to play an active and leading role in ICS Green groups and regional forums, delivering on the respective ICS sustainability priorities
- Build sustainability into all our strategies, plans, and investment decisions
- Learn from others in healthcare and beyond
- Clearly communicate our plan and progress to staff, patients and communities
- Continue to align our Green plan with the aims of the anchor institution programme
- Deliver on all contractual requirements

Engagement of Staff and Community

- Involve staff, patients, and our local communities to help us meet our goals
- Educate staff about how to improve home energy efficiency through the Trust website and social media
- Develop a network and involvement of green champions
- Strengthen our sustainability training offer for staff and increase participation rates
- Address the matters of environmental concern to staff
- Embed principles of sustainability within training placements and apprenticeships

2. Sustainable Models of Care

SCHT is committed to creating and embedding sustainable models of care and ensuring our operations and estates are as efficient, sustainable, and as resilient as possible. Increasingly, these plans focus on joint working and integrating services to provide better care for our patients. The Trust is committed to this agenda and has worked actively to integrate core community services in localities to improve care delivery.

During 2025- 2028 we will:

- Worked closely with our clinical leads to align Green initiatives with the Trust's clinical strategy.
- Continue to monitor and reduce the use of metered dose inhalers (MDIs) where clinically appropriate, noting that whilst we expect some future reduction, figures may plateau (reflecting saturation in the system, patient choice and the introduction of lower hydrofluoroalkane propellant MDIs on the market)
- Improve Green spaces to facilitate staff access for rest breaks and one to one meetings, together with patient benefits.
- Identify and map projects with the objective of reducing clinical waste (for example, PPE, packaging, medicines)
- Explore utilisation of sterilisation and re-use of equipment across more services, noting this is current practice in the dental service
- Move towards electronic health resources for families, including health questionnaires, birth packs and letters for our children's services
- Continue to work on initiatives, including hybrid working, which reduce staff travel journeys and journey time
- Further engage clinicians and patients to identify and deliver sustainable models of care across the Trust including patient self-care models; quality improvement methodologies to streamline services and improve patient outcomes (hence reducing health resource utilisation and associated carbon footprint)

3. Digital Transformation

The Trust deploys information technology to support staff to work efficiently in their roles. This means we can work in a more agile, paper free manner, to reduce environmental impact.

Over the past three years we have adopted digital innovations in patient care. However, we are also recognising digital systems use significant amounts of energy, and the environmental impact of digital has been considered and will continue to be monitored.

During 2025 - 2028 we will:

- Develop and implement a move away from paper-based patient records for them to be held digitally
- Implement a project to convert to electronic patient appointment letters in all settings
- Implement an office desktop energy saving scheme
- Where appropriate, offer virtual appointments in addition to face to face to facilitate patient choice, ensuring we are not excluding patients who do not have access to such technology, or who would prefer to be seen face to face.
- Implement Electronic Prescription Service (EPS) to reduce the number of paper prescriptions in primary care.
- Move towards implementation of an Electronic Prescribing and Medicines Administration (EPMA) system for patient care (mainly bedded services) in line with the national data strategy and improving patient safety
- Explore the implementation of electronic forms for requests such as blood tests to reduce paper usage
- Implement more digital care models, where appropriate for our patient demographic learning from ICS partners
- Continue to develop agile working protocols, which reduce staff travel journeys and journey time
- Implement a patient self-scheduling tool to reduce the number of patient letters sent
- Meet all sustainability requirements of the Digital Maturity Assessment
- Assess the energy and environmental impact of digital tools to ensure they support our pathway to Net Zero
- Streamline the use and increase repurpose of electronic equipment such as phones and laptops as well as ensuring environmental disposal

4. Travel and Transport

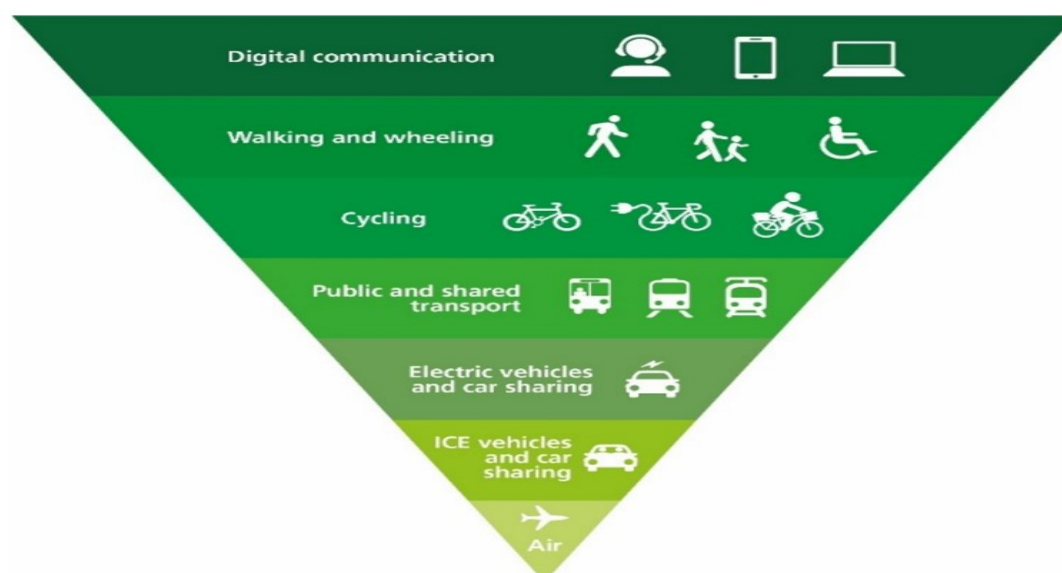
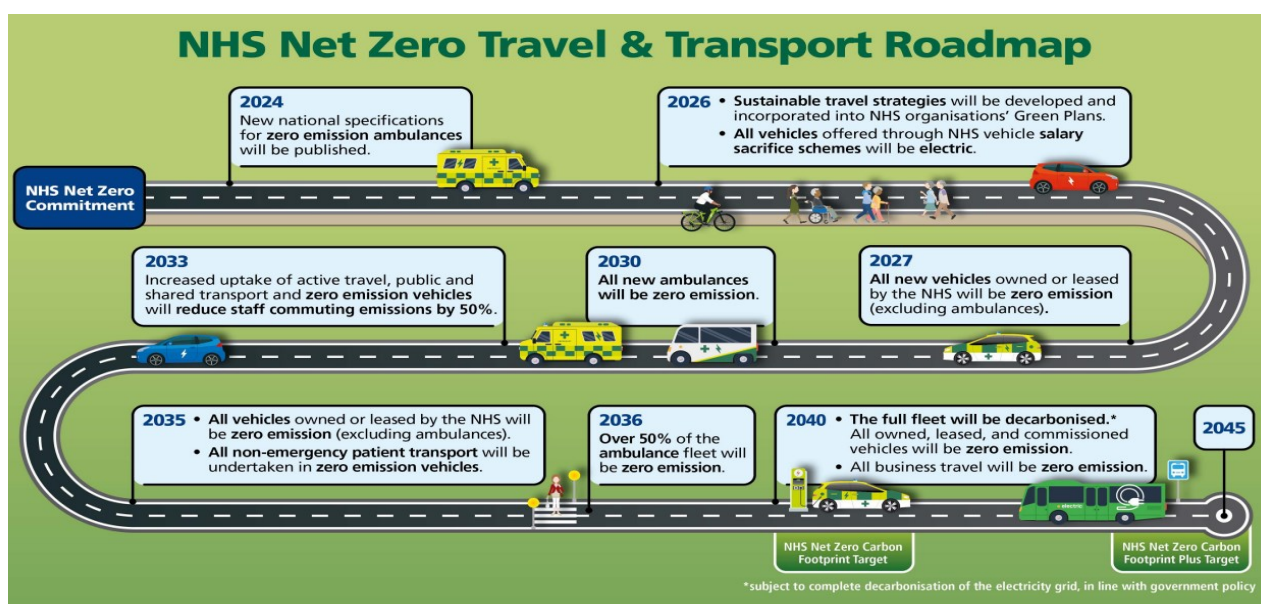
The NHS generates around 3.5% of all journeys in the UK, resulting in a travel-related carbon footprint of 3.5 million tonnes of CO₂e every year. SCHAT's travel and transport falls into four areas:

- Staff commuting
- Staff business travel (e.g., between sites, patient visits, meeting travel)
- Patient travel to appointments
- Logistics – supplies delivery

As a community Trust staff business travel is particularly significant and whilst pursuing sustainability, we need to ensure that our staff are well supported with their travel needs. Over the past two years we have made progress in the transition to low carbon travel. In April 2023, the Trust converted its vehicle lease schemes so that all new leases are Low Emission Vehicles (LEV) as we transition to electric or ultra-low emission vehicles only. The Trust's staff salary sacrifice scheme has been extended to cover vehicles recently to assist in promoting environmentally friendly alternatives.

An NHS Net Zero Travel and Transport Strategy was published in October 2023 which provides a clear timeline to achieve the commitments in Delivering a Net Zero National Health Service for travel and transport emissions. The diagram below shows the roadmap from the strategy that we will follow.

To support this transition, SCHT will work with system partners to make all travel more sustainable.



The diagram above shows the sustainable travel hierarchy with the least sustainable mode at the bottom in light green.

During 2025 - 2028 we will:

Develop an integrated sustainable travel strategy that supports staff and follows or exceeds the roadmap set out in the NHS Net Zero Travel Strategy.

Staff commuting and business travel

- Develop and implement a Transport & Travel Policy
- Reduce the impact of motor vehicle travel by encouraging green travel options (e.g. cycles, walking, car sharing, carbon-efficient vehicles, bus fare subsidies)
- Improve guidance to staff on the most sustainable ways to travel
- Maintain and promote the Trust bike trial and cycle scheme and carry out audits on cycle usage
- Instigate a car share database and aim to increase the number of car sharers each year.
- Continue to improve cycle storage as well as shower and changing facilities
- Move faster towards converting existing Trust vehicle leases to electric vehicles
- Work to influence our landlords to install appropriate electric vehicle charging points at our premises
- Explore the use of government buildings such as local Council sites as additional hot desk areas for domiciliary staff so they do not need to return all the way to their base office

Patient Travel

- Explore options to reduce travel to clinics where remote consultation is clinically appropriate.
- Increase the deployment of patient self-care options
- Work with our patient transport provider to:
 - Increase the number of hybrid/electric vehicles used
 - Schedule journeys more efficiently

Logistics

- Review the approach to ordering and logistics to assess whether the number of deliveries can be reduced
- Review suppliers to the Trust to implement “Just In Time” scheduling
- Review own storage arrangements so that the number of deliveries can be optimised
- Ensure sustainability of supplier vehicle fleet is included as part of procurement criteria
- Review the current equipment supply arrangements to increase efficiency and reduce environmental impact

5. Estates and Facilities

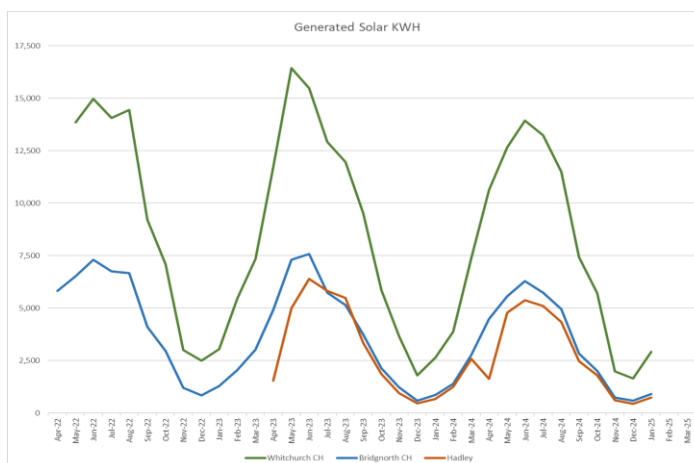
The Trust is committed to reducing the environmental impact of all our estate. We have embarked on a programme of energy efficiency and heat decarbonisation in line with national guidance.

We have made significant progress over the last three years including:

- Energy saving schemes, for example, boiler controls and insulation in our freehold estate.

- Solar PV arrays have been installed at three of our Freehold properties, two Community Hospitals and one Health Clinic and have generated over 325,000 kW of electricity consumed internally.

The graph of the 3 PV arrays across the Trusts freehold estate demonstrates the highs and lows associated with the British seasons.



- Converting lighting to LED (Light Emitting Diode), across both freehold and leasehold properties to move towards 100% LED coverage in the areas we occupy.

We are working with NHS Property Services to better understand their plans and timetable for environmental improvements at our lease sites to ensure they fully support our own plans and targets.

SCHT recognises the value of the natural environment, which plays a key role in our health, improving patient recovery rates and patient experience. We aim to maximise the quality of, and benefits from, our green spaces across our estate but also the beautiful landscape across Shropshire Telford and Wrekin and Dudley.

During 2025 - 2028 we will:

Buildings and Energy

- We will work with others to prepare heat decarbonisation plans for all of our freehold sites with a view to replacing gas boilers with low carbon alternatives when the current heating systems come to the end of their useful life
- Work with experts to enable business cases to be submitted for both internal and external funding.
- Continue to rationalise our estate to improve the built environment whilst reducing utility costs and usage as well as reduce our carbon footprint
- Reduce our electricity usage through energy efficiency measures (excluding uplifts from the installation of heat pumps)
- Reduce our gas usage through electrification of heat for our freehold sites
- Reduce our water usage, whilst not compromising safe water systems.
- Develop a methodology and procedures to provide quarterly updates on utility consumption across our estate, including sites with NHS Property Services.
- Continue to replace standard lighting with LED lights as well as deploy smart lighting controls
- Increase on-site energy generation from renewable resources.
- Install meters and sensors in a "smart building" approach to optimise building energy efficiency

- Work with partners and the NHSE Estates team to develop simplified guidance for community NHS organisations to deliver new build and refurbishments to net-zero standards in line with NHS guidance.
- Inform and educate staff, visitors, and patients about how their actions impact upon energy and water consumption.

Waste

- Review and update our internal waste policies and procedures to embed the new NHS clinical waste strategy and achieve targets by the end of 2026/27
- Continue to improve waste and recycling facilities and signage, including sites managed by others
- Continue to select contracting companies on a range of criteria which includes environmental sustainability, such as ISO-14001 Environmental Management System accreditation for recycling packing materials and offsetting pollution
- Create a list of criteria that we expect from our waste providers, essential and desirable
- Continue to recycle wheelchairs through the Wheelchair Recycling Project and reusing unwanted items of furniture and equipment
- Recycle furniture. SCHAT has worked with system partners including Local Authorities to recycle good quality furniture throughout the NHS estate
- Use our purchasing power wisely, working with suppliers to procure products that minimise packaging and offer innovative solutions to waste reduction by ensuring that this is fully integrated in tender processes
- Reduce food waste: develop a sustainable catering policy and only work with suppliers that can deliver our requirements
- Promote a culture of reuse and refurbishment of items, if cost effective, rather than buying new.

Green Spaces

- Consider how green space can be integrated into our working environment for the benefit of patients, their families and colleagues
- Use the green space improvement plans developed with Urban Green to draw up plans for all of our freehold sites
- Promote the health benefits of access to green spaces to staff, patients, and the wider community where possible
- Consider how we might repurpose unused areas to improve green space and biodiversity and create wildflower areas
- Work with staff and local community organisations to provide quality accessible urban green spaces and encourage their use
- Plant trees and ensure biodiversity through introducing 'wild areas' for wildflowers and to encourage insects and birds for our staff and communities to enjoy.

6. Medicines

As a community health provider, we do not use any desflurane or other volatile fluorinated anaesthetic gasses. Our dental and podiatry services do use nitrous oxide, however this is bottled and not piped. As a result, we have minimal scope 1 direct emission from anaesthetic gasses.

Our Pharmacy Team has issued guidance to clinicians on low carbon inhaler prescribing, incorporating guidance from the Integrated Care System (ICS). The Team monitors prescribing rates and carbon emissions quarterly.

Aside from the inhaler reduction workstream there have been no specific sustainability schemes focussed on medicines in the period of our previous Green Plan.

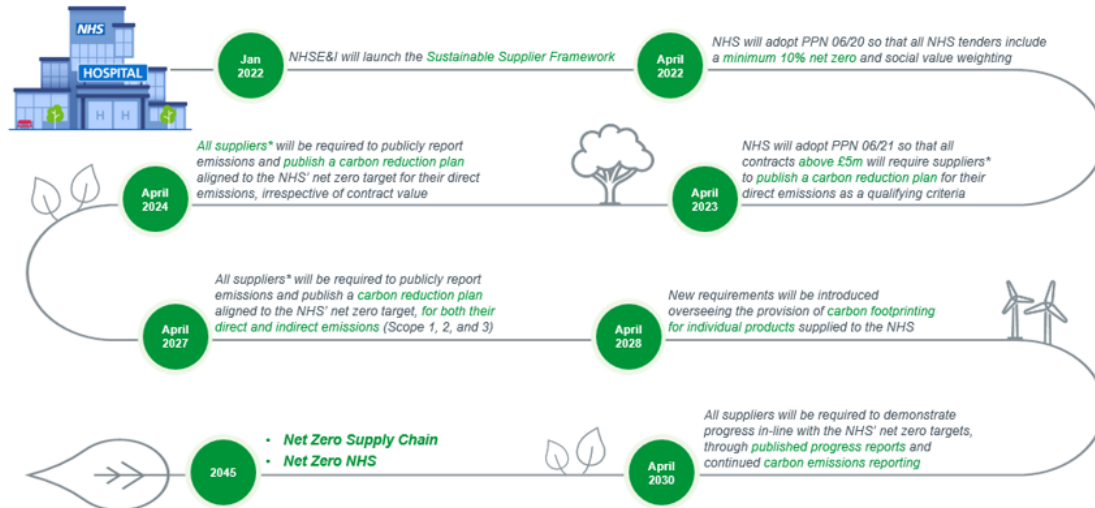
During 2025 - 2028 we will:

- Support prescribing in line with local ICS medicines formularies. Local formularies promote prescribing of lower carbon emission inhalers where clinically appropriate.
- Continue to monitor and reduce the use of metered dose inhalers (MDIs) and switch to lower carbon alternatives where clinically appropriate.
- Actively promote disposal of all medication at pharmacies and not in domestic waste, including inhalers of all device type, expired, empty or part used and recycling of cardboard packaging. This is also in line with national incentives (NHSE Pharmacy Quality Scheme and Medicines Optimisation opportunities for ICS).
- Ensuring social value weighting applies when considering procurement for any new or renewed contracts
- Work in partnership with ICSs to improve patient care whilst reducing carbon emissions both directly and indirectly e.g. through clinical quality review projects (such as respiratory) or supporting local and national incentive schemes via clinical staff
- Work with pharmacy providers who have embedded sustainable practices as part of their medicines supply services, e.g., waste management systems, use of SMART vehicles for medicines deliveries, streamlining and centralising the number of deliveries of medication to clinical areas. Indirect options for future which may be influenced through medicines provider include reduction of plastic bags and packaging for medicine supply, change to the types of dispensing label offering a biodegradable option
- Use of clinical waste bins to segregate medicines waste for recycling or incineration in clinical areas (cardboard, glass, and plastic)
- Reducing medicines waste more broadly through tackling polypharmacy and overprescribing. E.g. reduce overprescribing of medicines including inhalers through targeted medication reviews, where clinically appropriate.

7. Supply Chain and Procurement

Supply Chain and Procurement represents by far the largest share of the Trust's total carbon footprint (NHS Footprint Plus). Our approach is to align ourselves with the NHS Supplier roadmap launched in September 2021. The roadmap is shown in the graphic below:

Building net zero into NHS procurement



*To account for the specific barriers that Small & Medium Enterprises and Voluntary, Community & Social Enterprises encounter, a two-year grace period on the requirements leading up to the 2030 deadline, by which point we expect all suppliers to have matched or exceeded our ambition for net zero.

Procurement colleagues have been working to standardise the product range across all areas, which supports financial sustainability and will also focus on other key elements such as a requirement for suppliers to deliver Social Value as part of providing their services.

Shropshire Health Procurement Service has a dedicated Carbon Reduction Policy (CRP) that clearly outlines the process for managing CRPs in tenders. This includes the introduction of mandatory questions asking bidders to demonstrate their commitment to Net Zero, which is in 'addition' to the inclusion of a minimum [10% weighting on net zero and social value in NHS procurements](#) tender scoring. This has been a requirement since April 2022.

During 2025 - 2028 we will:

- Continue to implement the NHS supplier procurement roadmap including the requirement that all suppliers (irrespective of contract value) will be required to publish a carbon reduction plan.
- Continue to standardise the Trust's product range whilst accepting exceptions may exist across differing patient cohorts.
- Review and comment upon carbon reduction plans received from suppliers
- Ensure sustainability criteria are included in all supplier tenders. This will be in the main requirements specification and not just in the Social Value section.
- Continue to include sustainability criteria in the 10% Social Value section of tenders and review the responses.
- Proactively review our supplies, medicines, and medical equipment to look for opportunities to reduce packaging and waste (particularly plastic waste).
- Continue to re-deploy medical devices from services where they are not being used to services where they are needed.

8. Food and Nutrition

We provide food services at the premises where we have bedded services. These services are provided by our own catering teams at three of our community hospitals whilst catering at the fourth site is provided by a neighbouring partner organisation.

In all cases the Trust seeks to ensure, through its supplier partnership that:

- Food waste is minimised, including ensuring electronic meal ordering systems are in place
- Food waste, where it does occur, is properly disposed of
- Food options are healthy and balanced and include vegetarian options.

During the course of our new Green Plan we plan to increase our focus on food and nutrition to ensure we comply with all Greener NHS targets

9. Adaptation

Climate change is one of the biggest public health threats and challenges that we face. Extreme weather conditions, such as flooding and heatwaves, are becoming more frequent and severe. This section considers how our organisation's infrastructure, services, procurement, local communities, and colleagues are prepared for the impacts of climate change.

The Trust is part of a wider NHS system that must consider the following risks relating to climate change:

- People/population risks, e.g., changes to disease patterns, changes to the health needs of population, social and community impacts including vulnerable communities, migration, and mental health
- System risks, e.g., resilience to normal ways of protecting health and delivering care, business continuity, workforce and service delivery including training requirements
- Infrastructure risks, e.g., buildings, transport, supply chain, getting to essential services as user or staff, resource use, scarcity and continuity including energy, food and water
- Risks posed by specific event, e.g., heat, cold, floods, air quality.

During 2025 - 2028 we will

- Finalise our Climate Adaptation plan
- Follow NHS policy guidance for climate adaption as it is issued
- Continue to update our extreme weather policy and resilience action plans, including reviewing and updating the Heat Wave Plan
- Improve estates to ensure insulation for cold weather and cooling for hot weather
- Integrate our climate adaptation work with the mainstream estates works programme

6. Monitoring Progress and Reporting

The structure of this document is aligned to that of the Greener NHS guidance. Progress against the objectives will be reported to the Resource and Performance Committee bi-annually and to the Board annually.

As objectives are achieved, they may be replaced by a new objective to ensure continual improvement in our environment and sustainability performance and reflect our ever-changing services. The Trust's Annual Report will provide a summary of sustainability progress and carbon footprint reduction.

7. Communication

We have a large, geographically spread and diverse body of staff. Our approach involves maintaining high quality and regular communications across a variety of channels and continually reviewing and learning from what we do. We will look to implement and maintain a communications plan for all of the requirements that fall under this Strategy and promote a Greener Shropshire Telford and Wrekin and Dudley over the coming months and years.

We understand from staff feedback in our annual corporate services satisfaction survey that it is not always possible to reach all staff via news items on the intranet or via email and we will look at other ways of providing information.

Patient and public communications will primarily be by the Trust website but may also include specific promotional events or posters.

8. Risk

Sustainability risks fall into two categories, the long-term risks relating to the overall progress with our Strategy and our annual programme plan delivery risks. The former are logged on Datix and monitored in line with the Trust risk strategy. The annual programme risks are monitored at a programme level through monthly Trust project reporting.

The following describes the key longer-term delivery risks.

- **Delivery Failure**

Due to competing priorities for management time, there is a risk that Green/Sustainable targets do not fully deliver our ambitions. We will mitigate this risk by seeking to align the Trust priorities with the Sustainability agenda and ensuring careful review of progress.

SCHT is reliant upon third parties to deliver elements of this plan. In particular we are reliant on landlords to decarbonise the estate where we hold leases as this forms part of our carbon footprint. To mitigate this risk, we are establishing working groups with our key landlords such as NHS Property Services.

Another key area of delivery risk is the capacity of our estates team as many of the projects we need to deliver require estates team support and we looking to mitigate this through working more closely with partner organisations.

- **Finance**

To deliver the commitments in this plan we will need appropriate funding in place. There is a risk that NHS capital allocations will be insufficient to meet our requirements within the timescales set out. To mitigate this risk, we will continue to apply to grant funding sources such as the Public Sector Decarbonisation Fund (PSDS), noting that this is a competitive bid process.

- **Not meeting carbon reduction targets**

Due to the nature of the Trust's services, our absolute carbon emissions may increase as the intensity of our activities increases and the estate grows. To account for this, we will always normalise assessment emissions. (e.g., per £m revenue, per patient contact, per bed day or per m2)

- **Non-compliance with legislation or contractual requirements**

Due to the size, scale, rural and complex nature of our organisation, there is a risk we may not comply with all legislation. We will mitigate this risk through systems, training, and auditing of activities against the relevant requirements.

- **Climate change**

The risks to the organisation from climate change will be outlined in our Climate Change Adaptation Plan. These include risks to buildings, staff, health and wellbeing. Maintaining and delivering our plan is vital to address these risks.

- **Reputation**

Our reputation for Sustainability is paramount to our performance. We remain committed to taking a lead in this area and delivering our Plan monitored through a robust reporting structure.

9. Finance

Effectively managing environmental performance can bring financial benefits. Energy, carbon, and transport costs are rising and there are a number of ways we can manage the impact of this. The Trust's approach to funding its Green Plan will partly be by realising cost savings from:

- Driving down utility and waste costs by procuring more efficiently, investing in metering and monitoring to identify opportunities to reduce consumption
- Managing the way, we use energy and water on site – educating staff on best practice and quickly responding to issues such as leaks and overheating.

However, it is recognised that in some circumstances, we will deploy solutions that will not deliver a short-term financial return on investment. For example, the installation of heat pumps to replace gas boilers is likely to have a very long period of pay back, however these investments are necessary due to the requirements for sustainability and their overall value for money from creating a healthier environment for our communities.